PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09903410

| | | CLAIMS AS | (Column 2) | | - | SMALL ENTITY TYPE | | OTHER THAN OR SMALL ENTITY | | | | |
|---|---|---|---------------|-------------------------------|----------------|-------------------|-------------|-------------------------------|------------------------|------|---------------------|------------------------|
| TOTAL CLAIMS | | | 92 | | | 1 | ſſ | RATE | FEE | | RATE | FEE |
| FOR | | | NUMBER FILED | | NUMB | ER EXTRA | | BASIC FEE | 355.00 | OR | BASIC FEE | 710.00 |
| TOTAL CHARGEABLE CLAIMS | | | 114 minus 20= | | . (| 74 | | X\$ 9= | | OR | X\$18= | 1692 |
| IND | EPENDENT CL | AIMS | 2/ minus 3 = | | 1 | 8 | | X40= | | OR | X80= | 1440 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | | +135= | | OR | +270= | 270 |
| * If the difference in column 1 is less than zero, enter "0 | | | | | | olumn 2 | Ĺ | TOTAL | | OR | TOTAL | 4112 |
| CLAIMS AS AMENDED - PART II | | | | | | | | | | • | OTHER | 3 |
| _ | | (Column 1) | | (Colui | | (Column 3) | | SMALL E | | OR | SMALL | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total · | . 77 | Minus | // | 14 | ₹ 0 | | X\$ 9= | | OR | X\$18= | , |
| | Independent | NTATION OF M | Minus | *** a | Z/ | = 1 | $\{[$ | X40= | | OR | X80= | |
| | TINGT FRESE | N TO PLOT ALL | OCH PE DE | CNDCN | COLAM | | 1 | +135= | | OR | +270= | |
| | | | | | | | L | TOTAL DDIT, FEE | | OR | TOTAL ADDIT. FEE | |
| 11 | 3.05 | (Column 1) | | (Colu | mn 2) | (Column 3) | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVI PAID | BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | .65 | Minus | " L | 1 | = / | | X\$ 9= | | ØΑ | X\$18= | |
| | Independent | · \\0 | Minus | 9 |) ¹ | | ↓ [| X40= | | OR | X80= | |
| | PHSI PHESE | NTATION OF M | ULTIPLE DEP | ENDEN | CLAIM | <u> </u> | 」 [| +135= | | OB∕ | +270= | |
| | · | | | | | | L | TOTAL DDIT, FEE | | OR | TOTAL ADDIT. FEE | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | FIDEN | T CL AIAA | - | $\{ \Gamma$ | X40= | | OR | X80= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +135= | | OR | +270= | |
| ** | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." | | | | | | | | | OR I | TOTAL ADDIT. FEE | |
| | | mber Previously Pa ber Previously Pa | | | | | | ODIT. FEE | ropriate box | | | |